

**CHANGE OF  
CORRESPONDENCE ADDRESS  
Patent**

Address to:  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

|                        |                       |
|------------------------|-----------------------|
| Patent Number          |                       |
| Issue Date             |                       |
| Application Number     | 10/058,350            |
| Filing Date            | January 30, 2002      |
| First Named Inventor   | Charles A. Garris III |
| Attorney Docket Number | 502328                |

Please change the correspondence Address for the above-identified patent to:

☒ Customer Number: 23903

OR

|  |  |       |  |     |  |
|--|--|-------|--|-----|--|
| <input type="checkbox"/> Firm or Individual Name |  |       |  |     |  |
| Address  |  |       |  |     |  |
| Address  |  |       |  |     |  |
| City   |  | State |  | Zip |  |
| Country  |  |       |  |     |  |
| Telephone  |  | Fax   |  |     |  |

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

This form will not affect any "fee address" provided for the above-identified patent. To change a "fee address" use the "Fee Address Indication Form" (PTO/SB/47).

I am the:

- ☐ Patentee.
- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 37390.

|  |                     |           |              |  |
|--|---------------------|-----------|--------------|--|
| Typed or Printed Name  | Jeffery J. Makeever |           |              |  |
| Signature  |                     |           |              |  |
| Date   | August 28, 2006     | Telephone | 815-484-1900 |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. |                     |           |              |  |

☒ \*Total of 1 forms are submitted.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.